

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of

TANIZAKI et al.

Application Number: 10/565,300

Filed: January 20, 2006

For: MAP DISPLAY METHOD

ATTORNEY DOCKET NO. ASAM.0183

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) Art Unit 2612
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) Examiner Sigmund N. Tang
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)

Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

COVER LETTER

Sir:

[x] The fee for submission of claims is calculated as shown below:

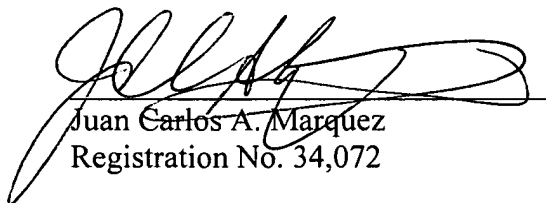
FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	25	25	5 (Over 20)	x \$52	0
Independent Claims	2	2	(Over 3)	x \$220	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$390	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28).				x ½	
				TOTAL	\$0

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

- | | |
|---|--|
| [x] Response/Amendment to Office Action
(with Claim Amendments) | [] Petition for Extension of Time for __ months |
| [] Substitute Abstract | [] Terminal Disclaimer |
| [] Priority Document | [] Letter to Draftsperson with __ sheets of
replacement drawings |
| [] Information Disclosure Statement
with Form 1449 and references | [] Request for Continued Examination |
| | [] Other |

- [] Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____.
- [] Credit card information for \$ _____ for the _____ fee is enclosed.
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, including fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to **Deposit Account Number 12-0555**.

Respectfully submitted,



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